PART B - FEE(S) TRANSMITTAL

Complete and send this form, together w... applicable fee(s), to: Mail Mail Stop ISSU. EE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450
or Fax (571)-273-2885

Let										
INSTRUCTIONS: This appropriate, All further indicated unless correct maintenance fee notifica	correspondence including the contract of the c	for transm ng the Pa nerwise in	nitting the ISSU tent, advance or a Block I, by (a	ders and notification) specifying a new c	of t	maintenance tees w spondence address;	and/or	(b) indicating a sepa	hould be completed where correspondence address as arate "FEE ADDRESS" for	
CURRENT CORRESPOND	y change of address)	Dan.	(a) Transmittal Thi	c cortiti	ionto annont ha negal t	or domestic mailings of the for any other accompanying the or formal drawing, must				
39083 7590 10/07/2008 CERMAK KENEALY & VAIDYA, LLP 515 EAST BRADDOCK RD SUITE B Alexandria, VA 22314						Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.				
								(Date)		
APPLICATION NO. FILING DATE				FIRST NAMED INVEN		ATTO	RNEY DOCKET NO.	CONFIRMATION NO.		
10/522,876				Mitsuo Tashiro	FP3002-0036			5251		
TITLE OF INVENTION: BREAST PUMP										
APPLN, TYPE	SMALL ENTITY	MALL ENTITY ISSUB F		PUBLICATION FEE DU		PREV. PAID ISSUE FEE		TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	NO \$		\$300		\$0		\$1810	01/07/2009	
EXAMINER ART UNIT				CLASS-SUBCLASS						
GILBERT, ANDREW M 3767				604-074000						
Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.				2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,						
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer				(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.						
Number is required. B. ASSIGNEE NAME A			•			# 40 - 10 - 10 - 10 - 10 - 10 - 10 - 10 - 10				
							ee is id	entified below, the d	ocument has been filed for	
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)										
Pigeon Corporation Tokyo, Japan Corporation Tokyo, Japan Corporation or other private group entity Government										
a. The following fee(s) are submitted: 4b. Payment of Fee(s): (Please first reapply any previously paid Issue fee shown above)										
Issue Fee Publication Fee (N	A check is enclosed. Payment by credit card. Form PTO-2038 is attached.									
Advance Order -	The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number (enclose an extra copy of this form).									
a. Applicant claim	tus (from status indicate s SMALL ENTITY state	us. See 37						TITY status. See 37 C		
NOTE: The Issue Fee an nterest as shown by the	d Publication Fee (if reg records of the United St	uired) wi ites Paten	ll not be accepted t and Trademark	d from anyone other the Office,	nan t	the applicant; a regi	stered a	ittorney or agent; or ti	ne assignee or other party in	
Authorized Signature	Tours	DX				Date 12	Dec	cember Zoo	28	
Typed or printed nam			> iealy	<u> </u>		Registration N		-		
This collection of inform in application. Confident submitting the complete his form and/or suggest Box 1450. Alexandra	nation is required by 37 C tiality is governed by 35 d application form to the ions for reducing this but fireinia 22313-1450. DO	CFR 1.31 5 U.S.C. 1 5 USPTO trden, sho D NOT SI	1. The information 22 and 37 CFR. Time will vary uld be sent to the END FEES OR (on is required to obtain 1.14. This collection depending upon the e Chief Information C COMPLETED FORM	or is es indiv offici IS T	retain a benefit by t timated to take 12 r vidual case. Any co er, U.S. Patent and O THIS ADDRESS	he publ minutes mment Tradem S. SENI	ic which is to file (and to complete, including son the amount of the lark Office, U.S. Dep of TO: Commissioner	d by the USPTO to process) ng gathering, preparing, and me you require to complete artment of Commerce, P.O. for Patents, P.O. Box 1450,	

Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number,